1: Messing E-5 (1953-1954)1957 MP5 Amhara MP5

PART VI: HEALING BODY AND SPIRIT

753 177 The "living museum" aspect of Abyssinian culture is perhaps nowhere so evident as in Abyssinian medicine. Both basic concepts and practical functions recall much that has been derived with little change (though much culture loss) from ancient Egypt, the ancient Near East, ancient Greek culture, plus regional ecological developments in Abyssinia itself.

753 756 Many ailments are regarded by the Amhara as closely interwoven in the body and spirit of the patient, and in fact, frequently no sharp distinction is made between bodily and spiritual ailments; so that the same illness may sometimes be treated by the surgeon-herbologist ("wozzesha"), and if not successfully cured, by the practitioner of exorcising magic, the "däbtära" scribe; or the practitioner of sympathetic magic, of the "zar" cult; or even the sorcerer, the "täqway". Only the latter is considered illegal. However, a fairly clear distinction is made between organic ailments and functional ailments, and on the basis of whichever preliminary diagnosis is made, it is decided which practitioner to call in first.

756 The association of the däbtära with the church has increased his activities in recent years from that of amulet-writer and herbologist to many of the functions of outright magic, particularly since the tanqway has become illegal. The dabtara always seems to have enjoyed the highest respectability and trust of any of the practitioners, for, as in ancient Greece, his activity in the official religion is believed to extend over the ills of the body and over the world of the spirits.

753 There is no philosophical basis for the development of medical systems among the Amhara, no reasoned system. Their medical concepts are pre-Galen, at most Aristotelian. The dabtara have, or, in some cases claim

756 to have, books handed down from past centuries, containing secret formulae, recipes, pharmacopeia of an intermingled empirical and magical nature. They warn inquirers that the public revelation of th these secrets would create great social dangers at the hands of the irresponsible.

171 In the days of ancient Egypt, Abyssinia was a supplier of materials for embalming, such as incense, myrrh, etc. It is therefore little wonder that much of Abyssinian medicine resembles that of ancient Egypt, e.g. the strong emphasis on purgatives used regularly.

753 The Amhara shares with peasants in many other parts of the world his belief in "strong" medicine, powerful in taste or heroic in effect or both. Since the Italian invasion, his belief in injections, which bring such miraculously quick results, has assumed magical proportions. Generally he distrusts and fears new medicines.

1. Healing the Body

A. The Surgeon-Herbologist-Empiricist ("woggesha"): Utilizing Nature.

759 Unlike the other medical practioners mentioned earlier, the woggesha does not try to dominate nature; he specializes in utilising what nature provides and in lending a helping hand. He is most often the first consulted, a kind of general practitioner, family doctor; and since he refrains from magical undertakings, he is neither feared nor suspected of witchcraft, which the other practioners, even the dabtara, often are.

Like the dabtara, the woggesha is often an expert herbologist, called "aqabi seray" (lit. who knows the work of nature). While walking in the bush, along brooks in the valley or in the "dega"

753 An important part of diagnosis is the decision whether an ailment is contagious ("fera") or not, and whether it is inherited, congenital ("quranna") or not. If inherited, marriages with such families are despised as not "attentam" (good stock), the same term used for descent from slaves or other "race" or both.

759 In general, the woggesha is most often called in organic ailments;
757 shares with the "dabtara" the practice of functional ailments; while the latter shares with the "zar" doctor the treatment of mental ailments.

2. Healing the Spirit

794 A. The "Zar" cult of supernatural spirits, its institution and cosmology.

755 One of the most complex developments of Amhara non-material culture, to which a great deal of mental ingenuity is devoted, is the healing of mental ailments. But this goes far beyond treatment and cure. The "zar" doctors do not limit themselves to treating some of the aforementioned mental ailments. They organise the afflicted, before, during and after "cure", into "zar" societies, which bear the earmarks of a religious cult, and to which the individual belongs henceforth until his or her (more often her) death. Here he finds the warm companionship of the fellow-afflicted; opportunity for expressive behavior; the religious feeling of having been of service; the personal attention of a personal possessive and protective spirit; and the visible leadership of the "zar" doctor who heads the organizational unit.

794 The zar doctor often a matriarch, differs only in degree from
756 her flock; for she, too, must be possessed, must be forever afflicted by spirits. But she has managed to learn to control them, call upon her more powerful protective spirits to aid her against evil spirits,

1: Messing E-5 (1953-1954)1957 MP5 Amhara MP5

X 794 776 753

There are male "zars" and female ones. The latter are considered more dangerous and more difficult to placate. Usually a "zar" spirit prefers to "possess" a human of the opposite sex, which results in a magical coitus, and causes epilectic seizures or catatonic states. In the latter case, usually a woman being "slept with" by a jealous male "zar", she seems drowsy and "turned within herself", disinterested in the environment, forgetting to eat. In the former case, the magical coitus sends her into orgasms of twisted arms and legs; or sometimes, twirling frenziedly; sometimes moving on all fours, emitting raucous sounds, biting the unwary, while being "ridden like a horse" by the "zar".

X 794 776 823

The "zars" of today are regarded as having geographical homelands. In Abyssinia their central location is believed to be in the province of Tigre, where they prefer woodland grottoes on the highland plateau, and where, if taken off guard under certain circumstances, they can become temporarily visible. Some zar doctors even narrow this central headquarters to a locality known as "Halawal" near the existing town of Makalle. On occasion the "zar" spirits there are believed to hold dances, even orgies. But most often they live in families, much like human Abyssinians, though on a superhuman level. They can ride elephants, lions, etc, to whom they refer as "farāsay" (lit. my horse), the same term they use to humans whom they "ride" during possession. But they despise the hyena, which is the "horse" of the evil "buda" spirit. The "cattle" of the zar spirits consists of wild gazelles, antelopes - the wild relatives of cattle domesticated by humans. Zar spirits are fond of peppery sauce ("wot") and "enjära" bread much like Abyssinians. Tree stumps serve them as tables. They like the flowers and green

[825]

X 794 repression and penalty, for no layman can know whether or not it is
756 the spirit who speaks through the doctor in any given situation.

X 794 The most frequent types of mental afflictions which the "zar"
164 doctor is called upon to treat are forms of hysteria (mostly in women), catatonic states (also mostly in women), and violent forms of possession including epileptic states (mostly in men). But he also treats some functional ailments, notably rheumatism, which is believed to have been caused by a "lazy zar" who wants his "horse" to stay in one place.

X 794 Though every person is considered a potential "horse" for a zar,
776 certain personality types are considered particularly vulnerable to
753 possession by evil zars: persons with sad, returing, malancholic natures; women who feel unloved and neglected by their husbands and thus offer little resistance to a male "zar lover"; persons who wish to escape, e.g. chronic drunkards.

X 794 Apathy, leading to catatonic states if not treated, indicates
753 incipient possession by an evil zar. The patient, often a woman,
758 withdraws into a corner, sits there huddled up, refuses to accept food. Until a zar doctor can be persuaded to come and take on the case, family and friends try to give the patient first aid. For, if she were to remain long in this state, it is believed that her "zar" could "ride" her to death. Therefore, relatives and neighbors come quickly, sing to the patient, entertain her, promise her whatever her heart desires, and generally try to create a merry atmosphere. Finally they try to lure the patient into watching them dance, and try to raise the patient playfully, so as to join them. The patient is never left alone until the doctor comes.

X 794 164 753

Psychotic cases among women usually assume a domineering male personality, such as believing themselves to be the ruthless Emperor Theodore, or the bloody Ras Mikael of Tigre. The zar doctor, however, elicits the confession of a "zar", so that he can treat the case.

Hysteria is believed mostly due to possession by female zars, who are more mischievous, silly and irresponsible than evil. If such a female zar possesses a male patient, he will manifest characteristics regarded as feminine, such as silly gaiety, and teasing behavior. If [838] not "awakened" quickly, such a state may become chronic and gradually destroy his masculinity. More common is hysteria among women, in which case the possession manifests itself as reversion to infantile behavior: the patient talks babytalk, skips about like a young goat and shamelessly demands little gifts even from strangers and passers-by. The patient must be humored, given gifts or at least promises, for the zar, speaking through the patient, may say: "If you don't give me this, I will kill my horse" (the patient).

Violent forms of possession may manifest themselves by aggression directed against the patient himself, such as beating himself, hitting the head against the wall, eating dirt, trying to climb the wall, wanting to run out at night to roam with hyenas. In some cases, if accompanied by nosebleed, or "weeping blood", this is diagnosed as "buda" and becomes a case for the däbtära practitioner. In cases of running amok, with aggression directed against others, it may be diagnosed as "ganyën" (djinn) and be treated either by the dabtara, zar doctor, or täñqway sorcerer.

X 794 776 758

The most common form of possession, particularly in women, begins with a kind of incubation. The male zar possessing her is jealous of her human husband, wants her to obtain a divorce and join a zar society

1: Messing E-5 (1953-1954)1957 MP5 Amhara MP5

X794 TK 153 cultivating the spirit. If she is already pregnant, the zar may cause a miscarriage; either because he wants his human mate "pure", or to take revenge on the husband for miserly refusal of a chicken or young goat requested by the wife for the "zar" sacrifice - which may cause the zar to take the fetus as his "mäqwädäsha" (lit. love gift).

When a male zar appears to a human female in a dream, he takes the form of a husband visiting his wife, if he is in a benevolent mood; if [231] angry, he takes the form of a black dog (though Ethiopian dogs are reddish) or of a snake. The actual possession, in this relationship is a magical coitus, expressed in the violently sensuous "gurri" dance. Some women possessed by a male zar drape their shamma (toga) in male fashion; some even put on ornaments of oldtime male warriors (lion mane, leopard skin), male jodphurs - all at the request of her male "zar", in which case she is actually "dressing" him.

X794 TK A woman who sleeps alone risks being struck by a male zar, and even neighbors sometimes admit having heard a "spirit visitor" at [845] night. When a baby is born deformed, it is regarded as the result [844] of a magical coitus. Male zar spirits avoid menstruating women, and during this period they may not sit on the skin of an animal that has been sacrificed to the zar. Male zar prefer to possess beautiful human females, and add to their beauty; so that some male [832] connoisseurs of female beauty claim that a woman's glowing charms leave her when her protective zar ("waqabi") leaves her. Therefore, there is some ambivalence in the hostility of human husbands to the possession of their wives by male zars; which may contribute to the frequency of such possession. For, at least, the neglected wife is then no longer ignored and may even become the center of attraction.

Possession of a man by a female zar occurs less often but is much more difficult to treat. Magical coitus in this case may render him impotent with human females. In some cases it manifests itself in nocturnal emissions of semen (wet dreams). It is believed that if a zar doctor (or a male patient) is possessed by a female zar at a young enough age, prior to puberty (which is very rare), he will develop female secondary sex characteristics, such as incipient breasts; some even say menstruation. Only zar doctors feel they have sufficient control over the situation to invite female zars to possess them, for the value of a few protective female zars as revealers of occult secrets is great.

Female zars are regarded as "uneducated" and "undisciplined"; none of them are believed to have "studied in Jerusalem" where many wise male zars are believed to have gone to school. Many female zars therefore never can become protective spirits. At most they can be flattered by special chants, and bribed to remain inactive, i.e. seated on the back of the "horse". More female than male zars are downright evil. This is especially true when a female zar possesses a human female. This is most often due to jealousy, and is so diagnosed if a woman suffers a series of miscarriages. For, while male zars are regarded as "striking the shoulder", female zars immediately" strike at the genitals".

One of the basic relationships with a zar spirit of the opposite sex, the "magical coitus", is solemnized by the zar doctor in a "marriage communion". The possessed is then referred to as "mushärra" (newlywed), and is attended by two "mizë" (best men, like in a human wedding) from among the circle of the society of the possessed, who ever thereafter are in attendance every time another possession occurs,

754 and are permitted to be dirty most of the time. As for males, the
776 buda also likes to feast on healthy-looking, fat, handsome warriors
[53] and chiefs. "Buda" is the general diagnosis when a person always known as healthy suddenly sickens and dies. Therefore it is feared even by the bravest warriors.

754 Even at present, when "modernization" is proceeding from the
776 central government, "buda" belief has not shrunk. It has simply
178 expanded to take in modern attractions. Thus, police officers in the provincial towns are believed to have attracted "buda", who has developed a taste for officers in nice, new uniforms; and is believed to be "greedy" for healthy-looking boys doing modern gymnastics in their new elementary schools, eager to consume their physical prowess and grace. Even rich, strong, fat, gay, well dressed Europeans are regarded as vulnerable, but less so because "they do not fear him". Fear attracts him too.

"Buda" is most active in August, at the height of the rainy season.
[82] His favorite time to strike is just after a heavy thunderstorm, when tornado-like gusts of wind seem to pull up the hut and try to pull the roof off. This would enable "buda" to "see" his victims better, and cannibalize them.

751 Many ways of trying to prevent victimization by "buda", or at
754 least of reducing one's vulnerability, have been devised over the
776 centuries. To reduce vulnerability, one should not appear too happy, too gay. One should not become an object of open admiration, or of envy and jealousy. One should further paraphrase the tabooed word "buda", by saying "watch your eyes". Newlyweds, who are very vulnerable, should cover their glowing faces for ten days, to keep

754 [647] Spitting or coughing blood (which may be tuberculosis?) is regarded as another sure symptom of buda, especially the dense "wagga". The buda is believed to cause widespread epidemics, if he is powerful and many vulnerable victims are in the area.

776 754 Certain buda are believed to have very specialized "educated" tastes. One likes to rob the voice of debtara choristers who chants harmoniously in church (perhaps in revenge for the same debtara's part-time, extracurricular activity as exorciser), whereupon the voice will begin to croak and steadily grow worse, until the singer cannot even carry a tune. When a cow gradually [825] stops giving milk, despite a big udder, this is ascribed to the special taste of an "educated" buda.

c. Diagnosis, Treatment and Prognosis

755 [753] Sometimes the victim declares that he has had a dream in which a certain suspected person, e.g. an ironsmith, has been "eating" him. This can become very dangerous for the accused.

The question which diagnosis has to solve is not "what's eating you?", but "who is eating you?"; for the buda spirit and sorcerer are one person.

When the exorciser appears, the "buda" reacts violently. Even apathetic patients suddenly break out in violent peals of laughter, howl like a hyena, crawl about on all fours. The exorciser begins to question the "buda" to find out his personal identity. The "buda" replies through the mouth of the victim, in a hoarse voice, which is attested by all Amhara onlookers as "not the normal voice of the victim". The diagnostic procedure is a battle of wits between the exorciser and the "buda". The

773 On the way he found an old witch. Interrogating her, St. Susneyos
789 learned that Werselya had gone into a garden. Finally, he found the demon sitting under a tree. He speared and mortally wounded her. Before expiring she promised never to afflict anyone who carried the inscribed name of Saint Susneyos.

The effectiveness of the amulet lies therefore in reminding the female demon of her promise to Susneyos.

789 Other common designs include angels with fiery swords (sometimes seen also incised upon wooden church doors); the cross over sun and moon; and the evil eye, sometimes oval, sometimes in profile, but often round with a red iris (symbolising the magic drinking of blood).

A typical formula against the demon of epilepsy, "barya", reads as follows:

> "You (actually "he", polite), Barya, who steals the heart of man (i.e. renders insane),
> who darkens the eye,
> who comes as shadow by nighttime,
> I put a spell on you, and curse you by ...(name of saint or angel)."

776 There are three common categories in the cosmology of demon
● 753 diseases treated by amulets:
755

(1) General evil-eye disease, referred to generically as "buda" - particularly in cases of puzzling functional and mental ailments - or identified and diagnosed by the name of a demon - particularly in fevers and paralysis.

(2) The demons of epilepsy, "Barya".

(3) Gynecological ailments, ascribed to specific female demons.

Amulets are collectively referred to as "ketab" (lit. writings, in Geez).

11:Levine Z-4,5 (1958-1961)1965 MP5 Amhara MP5

*565 776 many kinds: they may be male or female, Christian or Muslim, educated or unschooled, mischievous or somber. *Zār* are depicted as resembling the handsome, light-complexioned Abyssinians. They are not necessarily evil: sometimes a person is inspired by the sound of *zār* singing far off in the woods to add a new song to the local lore. But they are the great carriers of physical and mental illness. Many of the contagious diseases in Abyssinia, like typhus and smallpox, are referred to as "*zār* sicknesses." Above all, the *zār* is the bringer of seizures. When a *zār* lands on somebody's back the victim may go into a trance, succumb to melancholia, or break out in hysteria. Women are most often subjected to fits caused by *zār*—usually by male *zār*, who perform some kind of magical coitus with them and try to compete with their husbands. When a freak is born to a woman, it is often attributed to the malicious effect of a *zār* jealous of her husband.

*565 776 [562] Though some kinds of *zār* only desist from molesting their victims through constant propitiations, others can be won over to serve as powerful protecting spirits. Thus an initial discomfort can be turned into a permanent advantage, offering the erstwhile victim magical protection and, as one student has suggested, affording women a temporary escape from their depressed social status through the companionship and opportunities for self-expression found in associations of *zār* "patients."[6]

*565 754 781 Human beings with supernatural powers are of two kinds: those who manipulate the spirits and practice magic, and those who are themselves possessed. The possessed are called *ṭayb* or *budā*. *Ṭayb* (or *ṭabib*) in its original sense means "manual worker," but it has acquired the connotation of "one with the evil eye," the primary meaning of *budā*. By looking at someone the *budā* or *ṭayb* "drinks his blood" through the magic power of his evil eye. The victim will first feel a severe headache and fatigue, then show hysterical frenzy, and finally intestinal cramps. His fingers will be clenched around his thumbs, a sign that the *budā* has grasped the thumbs and does not want anyone to see him taking his "food" from the victim. If the victim is not cured he will eventually waste away and die.

*565 754 [262] [189] [323] [326] [554] The *budā* is helpless to check his malevolent power, and if he enters the home of a friend who is not a *budā* he will shout ahead to get the children out of the way for fear he might unwittingly infect them. People who eat pork are thought invulnerable against the evil eye, the pork in their systems serving as a kind of antibody against the infection. Potters and metalsmiths have been kept in a low caste position in Abyssinia partly because of the belief that such artisans inherit this evil power along with their craft from their parents. It is important in selecting a spouse for one's child to make sure that there is no *budā* blood in the family, and to be called a *budā* or *ṭayb* is one of the more serious insults.

The Amhara peasant has many beliefs about the malevolent beings in his

11:Levine Z-4,5 (1958-1961)1965 MP5 Amhara MP5

to cheat the locals. The health officer in charge of the team then brought some of the objectors to the mobile laboratory, patiently explained what was going on, and how it would benefit the people. Before long word got around that these outsiders were not so evil after all, and the doors of Dajan opened.

Given the possibility that the Amhara peasant may come to acknowledge the public health worker as a legitimate agent of change, what about the discrepancy between the ideas advanced by the public health workers and the ideas of his traditional culture? The conception of the causation of illness is radically different in the two cultures. Since the peasant views the etiology of disease as a function of the will of supernatural beings, on what grounds could he adhere to prophylactic measures based on naturalistic conceptions?

Valid though our characterization of the peasant's concept of causation may be, it is nevertheless a very simplified one. It is unlikely that any world view is totally devoid of some sort of naturalistic explanations, just as, conversely, well-educated moderns often cling to residues of "superstition." Though the Amhara's general framework for understanding causation is not naturalistic, he does possess a number of specific notions which can be interpreted as naturalistic or protonaturalistic. Here are some examples:

(1) The belief that an excessively dirty house brings sickness (even though in practice animals are permitted to urinate and defecate indoors and strings of soot to hang from the rafters).

(2) A vague notion that the daily washing of hands, mouth, and feet is related to health.

(3) The concept of *metch*, an ailment involving fever and pains, believed to come from exposure to dirty places as well as excessive exposure to the sun (though the devil is often thought to be the conveyer of the ailment).

(4) The concept of *gershā*, a notion that a convalescent is liable to relapse unless he refrains from eating unaccustomed foods, resumes work slowly, stays out of the sun, and washes his body and clothes.

(5) A latent concept of contagion, found in: (a) the belief that smelling the urine of another will give one a cold, (b) the belief that the breath of a typhus patient will communicate his disease, and (c) the custom of referring to all diseases which can be given by one person to another as "*zār* sickness."

Even when the explanations set forth by the health workers deviate too much from what the peasant can possibly conceive as plausible, there may still be grounds to justify his accepting some strange advice through an appeal to more familiar beliefs and interests less directly related to the matter at hand. Thus, while peasants have been reluctant to accept the sanitarian's argument that diseases will be prevented by sanitizing the water supply through building wells, they have often been persuaded to build wells by the prospect of securing a more convenient source of water.

Measuring the relative strength of forces supporting and opposing change

11:Levine Z-4,5 (1958-1961)1965 MP5 Amhara MP5

ing support this permissiveness. If a baby is not suckled whenever he wishes to be, it is believed that he will become sick or will not grow strong, and the negligent mother is looked on as one of evil character.

Not only is the infant's desire to suck freely indulged, but it is indulged for a fairly long time. The normal period for breast-feeding is two to three years. Only if a new sibling happens on the scene is weaning deliberately effected. If another child is not forthcoming, and the mother is not ill, there is no inclination at any time to deny the child the breast. In many cases nursing continues until the child is four or five, when his work obligations begin to interfere.

The attitude of oral permissiveness is manifest in other ways. Thumb-sucking is accepted with good humor, and when a baby is in a bad mood he may be given his father's or mother's thumb to use as a pacifier. Though Amhara are otherwise very modest, mothers do not hesitate to offer the breast no matter where they happen to be. When referring to the process of breast-feeding, Amhara males invariably cup one hand under an imaginary breast to depict this common and natural event. When speaking to persuade a guest to accept a second glass of beer, the Amhara host has recourse to the formula: "But your mother's breasts are two!" Another indication that breast-feeding is a very familiar part of the Amhara's social environment is that in interpreting the TAT cards, a number of respondents interpreted some scene with children as a situation of breast-feeding, although this was not depicted on any of the cards.

The emotional context of breast-feeding is more significant than the physical pleasures involved. Until he leaves the breast the Amhara child inhabits an emotional paradise. He receives much attention and is fondled by both parents and by other relatives. He remains close to his mother at all times, sleeping alongside her at night and spending the day near her when not tied in a bundle on her back. He accompanies her thus to visit relatives, attend market, or go to church. Only when the mother goes to fetch water is he separated from her, for there is not room for both baby and water jug on the mother's back, and besides, water holes are the abodes of evil spirits who may try to make the child sick.

After he is weaned, the Amhara child enters a much harsher emotional atmosphere. He must adjust to a regime of commands, responsibilities, and punishments. He is nostalgic forever after for the warmth and security of his earliest years, a condition vividly associated with the experience of sucking at the breast. The prominence in Amhara culture of this association of emotional security with breast-feeding is shown by such phenomena as the mammary symbolism of the rooftop and the institution known as the "breast-father." The former consists of a clay ornament, whose color and shape clearly replicate the female nipple, which is placed atop the breast-like conical roof which

12: Young

MP5 Amhara MP5

• 753

[For information on theory of disease, see category 116, pp. 5-26, 35-40, 91-99, 116-118, 182-183, 190, 195-196, and 231-246.]

12:Young E-4,5 (1966) 1971 MP5 Amhara MP5
Begemder

CHAPTER ONE

AN OVERVIEW OF AMHARA DISEASE BELIEFS

128 This chapter describes the "natural" environment in which the Amhara set their system of disease beliefs. The description is in five steps, opening with an account of human physiology as it is conceived by the Amhara. This is followed by an enumeration of the agencies held responsible for transforming the man of good health into a sickman. Each pathogenic agency is described in terms of its physiological effects and symptomatic expressions. As its third step, this chapter considers these symptoms from a nosological point of view, that is, with regards to the rules by which symptoms are grouped under specific disease names, and by which these classifications are related to one another to form a disease-name taxonomy. [753] The Amhara disease-name taxonomy is simple, and by itself reveals relatively little about the system of disease beliefs of which it is a part. For this, a fourth step is required. Here, the specific disease-names are considered from an etiological perspective, in terms of the explanations associated with the onset of various ailments. In the text, a typology of five etiologies is described. The etiologies are unnamed, but implicit throughout the range of Amhara prophylactic,

827 sign functions to only a few of these. Among these organs, the heart is considered primary. First, it inspirits and regulates all other organ activity by means of the vital heat which it pulsates and radiates throughout the body. While pulsing within normal frequencies, sufficient heat is generated to sustain good health (tena); more rapid pulsing produces excessive heat which is perceived externally as fever (tukusat). When cardiac hyper-activity is of great intensity and persistence, the heart's ability to exert its authority over the subordinate organs is progressively reduced; this is expressed symptomatically as chronic fatigue and lassitude. In addition to this vitalising function, the heart controls body movement through the jirat cords, a term including veins, arteries, tendons, and ligaments. The heart is also capable of limited movement downward, backward, and can spin in place. These movements have no febrile effect but since the heart is the seat of the intellect, these motions often lead to mental disorientation and confusion.

*753 827 *[192] *[192] [763]

Heart and blood share no special tie, nor is the latter's vascular confinement appreciated. Anatomically, the blood is instead associated with a reservoir organ (yidem sir, "blood's root") located at the base of the skull. Functionally, the blood's most specific association is with procreation, for maternal blood is necessary to nourish the homonculus to infancy. Because the re-

*[192] [841]

mation, the debtera's powers are derived from his intimacy with spirit beings, the ganels.

The therapeutic usefulness of the debtera's familiars is believed to be related to the ability of ganels to produce a wide variety of ailments. Some of these ailments coincide symptomatically with ailments treatable by herbalists (although they are etiologically distinct), other of these ailments can be cured by herbalists' therapies, and yet other ailments caused by ganels are symptomatically distinct from any ailments treatable by herbalists. These relationships between practitioner, etiology, and syndrome are diagrammed and annotated in Table 6.

From the perspective of the client, the debtera is therapeutically effective because he can force or cajole his familiars to communicate therapeutically significant information (including pharmacological information) and to give other assistance. The debtera's power is conceived by the clients in terms of his ability to control his familiars. The most powerful debtera is the ganel gelac, a practitioner whose therapies the client can never divorce from direct associations with ganel familiars. For the "weaker" debtera, however, it is only in the abstract that clients posit a causal role for spirit familiars in any episode that such a debtera treats successfully. In the context of actual disease episodes,